



Centerstone Bloomington, Indiana Cohort II

"If I Knew then What I Know Now..."

Overview

- Model: Imbedded clinic focusing on a wrap-around care management model of care; working in tandem with PCPs and other health-care providers in the community providing day-to-day supplemental health coaching and support.
- Staffing: MD, APN, LPN, CRS, health coach (rehab specialist), office professional, program evaluators, and 5-6 interns between clinic/evaluation.
- Wellness Activities: engage in life skills training activities while exercising (aquatics, walking, other), individual coaching & support relevant to modifiable risk factors (smoking, lifestyle habits, medication management, weight), and peer support group.

Accomplishments & Successes

- **Unity Health Partners on site clinics**
- **Johnson Nichols Rural Health Clinics**
 - ISALUS – New Electronic Medical Record
 - New blended facility in Owen County – \$400,000 grant
- **Improving Physical Health of Clients**
 - Health Navigator training for adult/youth case managers
 - Graphic Display of Wellness Indicators
- **FQHC/RHC Bi-Directional Integration –**
 - CSI therapists placed at 4 FQHCs and RHCs
- **Data Management/Youth Health Navigator**
 - MDWise JIVA claims data
 - Tracking HEDIS measures

Accomplishments & Successes

- **Hospital Engagement Projects**
 - HealthLINC HIE, ADT Alerts from Bloomington Hospital
 - Lean Sigma project at Columbus Regional Hospital
- **Telehealth**
 - Expansion of tele-psychiatry capabilities to 9 locations
 - Beginning work on primary care
- **Electronic Recovery Engagement Center (SAMSHA)**
- **Collaboration and Advocacy**
- **Miscellaneous:**
 - Client exercise/nutrition training at on-site staff gym
 - Participating in Chantix study on smoking cessation
 - Hepatitis C grant from IU School of Public Health
 - Collaborative health work with IU planning grant.
- Articles in Mental Health Weekly, Open Mind, Herald Times, ISMA

Challenges & Outcomes

- Lack of access to claims data; partner with MCO's to get this data
- Cultural transformation to be truly Integrated
- Grant being viewed as temporary
- Non-BE Well staff being "territorial" due to productivity issues and/or not understanding our services
- Changes to EHR necessary to bill E&M codes
- "Dragon in moat" experience in attempts to collaborate with other health-care providers
- MI training a necessity for all staff including medical providers
- "It takes a village"
- Need for leadership buy-in
- Role Definition and developing scope of practice
- How to integrate with other service lines

Challenges & Outcomes

- Shift in organizational mindset
- Finding the "right" staff
- Being able to attend to patient needs in the moment rather than just scheduling appointments
- Health-care reform & implications for patients
- How to bill MRO for physical health
- No SPA funding; doing health home model with no additional funds

Moving Forward

- Implementing Health Coaching Services across Centerstone of Indiana
- Use Primary Care clinics on site for SPMI & others
- Electronic Health Coaching (eHealthCoach)
- Pilot Projects (MDWise pays for work with high risk youth and HEDIS compliance)
- Use of Hospital Alerts (admission, discharge, transfer) & continued work with local HIE
- Tracking health indicators in record (continues to be standard practice for rehab specialists)

Words of Wisdom: Don't Do What We Did/or What I Wish We'd Done Differently

- Have a way to be more visible, be an active presence in more teams, more community engagement
- It takes a village
- Systems Theory

Words of Wisdom: Tips for Success

- Motivational Interviewing for all staff
- Don't try to do it all; find your allies
- Clear boundaries & scope of practice
- Top-level support is a must
- Be patient, assertive, resilient
- Have a mentor and good support system
- BE Well (Build Exceptional Wellness in your own life and your team).